2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

FILED Apr 18, 2005 08:00 AM Secretary of State DOCUMENT # P94000043660 1. Entity Name RYAN'S ENVIROCLEAN, INC. Principal Place of Business Mailing Address 469 NW 53RD ST. 469 NW 53RD ST. BOCA RATON, FL 33487 BOCA RATON, FL 33487 04152005 No Cha-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0495418 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ANTAL, MARK S 469 NW 53RD ST. DO NOT WRITE BOCA RATON, FL 33487 IN THIS SPACE 3. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 **\$5.00** May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS DP TITLE ANTAL, MARK S NAME 469 NW 53RD ST. STREET ADDRESS CITY-ST-ZIP BOCA RATON, FL 33487 1000000313150 TITLE 04/18/05-80113-017 150.00 NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE SUP NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the Information supplied with this filling does not qualify for the exemption stated in Section 119 O7(3)(i), Florida Statutes, I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to effect this peop as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all originality of the properties.

INTED NAME OF SIGNING OFFICER OR DIRECTOR